

<i>SERFF Tracking Number:</i>	<i>BRTN-125484476</i>	<i>State:</i>	<i>Arkansas</i>
<i>Filing Company:</i>	<i>Brotherhood Mutual Insurance Company</i>	<i>State Tracking Number:</i>	<i>EFT \$50</i>
<i>Company Tracking Number:</i>	<i>AR P FC 2008 01</i>		
<i>TOI:</i>	<i>01.0 Property</i>	<i>Sub-TOI:</i>	<i>01.0001 Commercial Property (Fire and Allied Lines)</i>
<i>Product Name:</i>	<i>TERRORISM - EXPEDITED FILING TRIPRA</i>		
<i>Project Name/Number:</i>	<i>TERRORISM EXPEDITED FILING TRIPRA/AR P FC 2008 01</i>		

Filing at a Glance

Company: Brotherhood Mutual Insurance Company

Product Name: TERRORISM - EXPEDITED FILING TRIPRA SERFF Tr Num: BRTN-125484476 State: Arkansas

FILING TRIPRA

TOI: 01.0 Property

SERFF Status: Closed

State Tr Num: EFT \$50

Sub-TOI: 01.0001 Commercial Property (Fire and Allied Lines)

Co Tr Num: AR P FC 2008 01

State Status: Fees verified and received

Filing Type: Form

Co Status: Submitted

Reviewer(s): Betty Montesi, Llyweyia Rawlins, Brittany Yielding

Authors: Linda Emenhiser, Karen Miller

Disposition Date: 02/22/2008

Date Submitted: 02/13/2008

Disposition Status: Approved

Effective Date Requested (New): 06/01/2008

Effective Date (New): 06/01/2008

Effective Date Requested (Renewal): 06/01/2008

Effective Date (Renewal): 06/01/2008

State Filing Description:

General Information

Project Name: TERRORISM EXPEDITED FILING TRIPRA

Status of Filing in Domicile:

Project Number: AR P FC 2008 01

Domicile Status Comments:

Reference Organization:

Reference Number:

Reference Title:

Advisory Org. Circular:

Filing Status Changed: 02/22/2008

State Status Changed: 02/22/2008

Deemer Date:

Corresponding Filing Tracking Number:

Filing Description:

In accordance with your filing requirements, Brotherhood Mutual is submitting this filing under the provisions of your EXPEDITED FILING PROCEDURES. The filing will apply to new and renewal policies which have effective dates of June 1, 2008, and after.

<i>SERFF Tracking Number:</i>	<i>BRTH-125484476</i>	<i>State:</i>	<i>Arkansas</i>
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After reviewing the Terrorism Risk Insurance Program Reauthorization Extension Act of 2007 (TRIPRA), we are amending policy form BGL-0600. We have added the capping language as an introductory notice to the form.

We are also submitting our disclosure notices and policyholder notices for informational purposes. Please note that several of the endorsements listed on the notices do not require a change to the existing terrorism language. Therefore, we have not included them in this filing.

We are choosing to maintain our currently filed rates and rules.

Company and Contact

Filing Contact Information

Linda Emenhiser, Sr. Rate & Filing Coordinator lemenhiser@brotherhoodmutual.com
P. O. Box 2227 (260) 482-8668 [Phone]
Fort Wayne, IN 46801 (260) 483-7525[FAX]

Filing Company Information

Brotherhood Mutual Insurance Company	CoCode: 13528	State of Domicile: Indiana
PO Box 2227	Group Code: -99	Company Type:
6400 Brotherhood Way		
Fort Wayne, IN 46801-2227	Group Name:	State ID Number:
(260) 482-8668 ext. 9972[Phone]	FEIN Number: 35-0198580	

Filing Fees

Fee Required?	Yes
Fee Amount:	\$50.00
Retaliatory?	No
Fee Explanation:	
Per Company:	No

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
Brotherhood Mutual Insurance Company	\$50.00	02/13/2008	17954551

SERFF Tracking Number:	BRTH-125484476	State:	Arkansas
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TOI:	01.0 Property	Sub-TOI:	01.0001 Commercial Property (Fire and Allied Lines)
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Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Approved	Llyweyia Rawlins	02/22/2008	02/22/2008

<i>SERFF Tracking Number:</i>	<i>BRTH-125484476</i>	<i>State:</i>	<i>Arkansas</i>
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<i>Product Name:</i>	<i>TERRORISM - EXPEDITED FILING TRIPRA</i>		
<i>Project Name/Number:</i>	<i>TERRORISM EXPEDITED FILING TRIPRA/AR P FC 2008 01</i>		

Disposition

Disposition Date: 02/22/2008

Effective Date (New): 06/01/2008

Effective Date (Renewal): 06/01/2008

Status: Approved

Comment:

Rate data does NOT apply to filing.

SERFF Tracking Number: BRTH-125484476 State: Arkansas

Filing Company: Brotherhood Mutual Insurance Company State Tracking Number: EFT \$50

Company Tracking Number: AR P FC 2008 01

TOI: 01.0 Property Sub-TOI: 01.0001 Commercial Property (Fire and Allied Lines)

Product Name: TERRORISM - EXPEDITED FILING TRIPRA

Project Name/Number: TERRORISM EXPEDITED FILING TRIPRA/AR P FC 2008 01

Item Type	Item Name	Item Status	Public Access
Supporting Document	Uniform Transmittal Document-Property & Casualty	Approved	Yes
Supporting Document	EXPEDITED TERRORISM TRANSMITTAL	Approved	Yes
Form	(Property) Certified and Non-Certified Terrorism Loss - Covered Acts of Terrorism	Approved	Yes
Form	Policyholder Coverage Notice Terrorism- Related Loss	Approved	Yes
Form	Policyholder Coverage Notice Terrorism- Related Loss	Approved	Yes
Form	Policyholder Coverage Notice Terrorism- Related Loss	Approved	Yes
Form	Policyholder Coverage Notice Terrorism- Related Loss	Approved	Yes
Form	Policyholder Disclosure of Terrorism Insurance Coverage	Approved	Yes

SERFF Tracking Number: BRTH-125484476 State: Arkansas

Filing Company: Brotherhood Mutual Insurance Company State Tracking Number: EFT \$50

Company Tracking Number: AR P FC 2008 01

TOI: 01.0 Property Sub-TOI: 01.0001 Commercial Property (Fire and Allied Lines)

Product Name: TERRORISM - EXPEDITED FILING TRIPRA

Project Name/Number: TERRORISM EXPEDITED FILING TRIPRA/AR P FC 2008 01

Form Schedule

Review Status	Form Name	Form #	Edition Date	Form Type	Action	Action Specific Data	Readability	Attachment
Approved	(Property) Certified and Non-Certified Terrorism Loss - Covered Acts of Terrorism	BCL-0600	3.0	Endorsement/Amendment/Conditions	Replaced	Replaced Form #:0.00 BCL-0600 2.3 Previous Filing #: AR PC 06-017970		BCL-0600 3-0.pdf
Approved	Policyholder Coverage Notice Terrorism-Related Loss	BN-6025-A-D	3.0	Other	Replaced	Replaced Form #:0.00 BN-6025-A-D Previous Filing #: Informational filing		BN-6025-[A-D] 3-0.pdf
Approved	Policyholder Coverage Notice Terrorism-Related Loss	BN-6025-A	3.0	Other	Replaced	Replaced Form #:0.00 BN-6025-A Previous Filing #: Informational filing		BN-6025-A 3-0.pdf
Approved	Policyholder Coverage Notice Terrorism-Related Loss	BN-6025-A-D MP	3.0	Other	Replaced	Replaced Form #:0.00 BN-6025-A-D MP Previous Filing #: Informational filing		BN-6025-[A-D] MP 3-0.pdf
Approved	Policyholder Coverage Notice Terrorism-Related Loss	BN-6025-A MP	3.0	Other	Replaced	Replaced Form #:0.00 BN-6025-A MP Previous Filing #: Informational filing		BN-6025-A-MP 3-0.pdf
Approved	Policyholder Disclosure of Terrorism Insurance Coverage	PD-6026A	3.0	Other	Replaced	Replaced Form #:0.00 PD-6026A Previous Filing #: Informational filing		PD-6026A 3-0.pdf

Notice- The federal Terrorism Risk Insurance Act contains a \$100 billion cap that limits U.S. Government reimbursement as well as insurer liability for losses resulting from certified acts of terrorism when the amount of such loss in any calendar year exceeds \$100 billion.

IF THE AGGREGATE INSURED LOSS FOR ALL INSURERS EXCEEDS \$100 BILLION, YOUR COVERAGE MAY BE REDUCED.

(PROPERTY)
CERTIFIED AND NON-CERTIFIED TERRORISM LOSS
- COVERED ACTS OF TERRORISM -

COVERED TERRORISM LOSS

We will pay for loss to **your** covered property if:

- a. An applicable property coverage of this policy would otherwise apply to such loss in the absence of terrorism; and
- b. such loss is caused by a **covered act of terrorism**.

But **we** will not pay for any terrorism-related loss unless both a. and b. above apply.

CONDITIONS

1. The following provisions are added.

- a. Neither the **terms** of this endorsement nor the **terms** of any other terrorism endorsement attached to this policy provide coverage for any loss that would otherwise be excluded under any form, endorsement or provision of this policy, including, but not limited to:
 - 1) any exclusions that address war, military action, or nuclear hazard; or
 - 2) any other exclusion of the policy.
- b. The absence of a terrorism exclusion on this policy does not imply coverage for any loss that would otherwise be excluded by this endorsement under:
 - 1) exclusions that address war, military action, or nuclear hazard; or
 - 2) any other exclusion of the policy.

- c. If an authorized individual designated by an enacted federal Terrorism Risk Insurance Act determines that the amount of certified terrorism loss has exceeded the maximum annual liability as set forth by the Act, then **we** will not pay for any portion of the loss that exceeds the maximum annual liability stated in the Act.

DEFINITIONS

In addition to the words and phrases defined elsewhere in this policy, the following definitions will apply to the provisions of this endorsement:

1. **Covered act of terrorism** means a malicious act (whether or not such act is certified by government officials as a qualifying "act of terrorism" under any federal Terrorism Risk Insurance Act) that:

- a. is violent or is dangerous to human life, property, or infrastructure; and
- b. is undertaken in an effort to coerce the civilian population of the United States or to influence the policy or affect the conduct of the United States Government by coercion;

but only if such act does not involve:

- 1) the use, release, dispersal, application or escape of any nuclear or radioactive materials of any kind;
- 2) any nuclear reaction or the release of any radiation, or any radioactive contamination;
- 3) the use, release, dispersal, application or escape of any biological or chemical materials

that have any injurious,
pathogenic or poisonous effect
of any kind; or

- 4) any contamination of property,
interruption of any business or
ministry operation, or any other
damage, loss or expense arising
directly or indirectly out of the
situations set forth in items 1)
through 3) immediately above.

Any act to which 1) through 4) of this
definition applies will not be considered to be
a **covered act of terrorism**.

Policyholder Coverage Notice

Terrorism-Related Loss

General Notice- The federal Terrorism Risk Insurance Act contains a \$100 billion cap that limits U.S. Government reimbursement as well as insurer liability for losses resulting from certified acts of terrorism when the amount of such loss in any calendar year exceeds \$100 billion.

IF THE AGGREGATE INSURED LOSS FOR ALL INSURERS EXCEEDS \$100 BILLION, THE TERRORISM COVERAGE PROVIDED TO AFFECTED POLICYHOLDERS MAY BE REDUCED.

Policy-Specific Notice- A series of forms has been added to your *MinistryFirst* policy that will impact both property and the liability coverages relating to losses arising out of terrorism. These forms are as follows:

BCL-0600 (CERTIFIED AND NON-CERTIFIED TERRORISM LOSS- PROPERTY)
BGL-0250 (CERTIFIED AND NON-CERTIFIED TERRORISM LOSS- LIABILITY)
EX-0651 (NUCLEAR, CHEMICAL AND BIOLOGICAL TERRORISM EXCLUSION- PROPERTY)
EX-0281 (NUCLEAR, CHEMICAL AND BIOLOGICAL TERRORISM EXCLUSION- LIABILITY)

The effect of these forms in general is to extend coverage for certain terrorism-related losses to the extent that coverage would have applied in the absence of terrorism. An exception applies for losses arising out of excluded acts of nuclear, chemical or biological terrorism, for which no coverage will apply.

For specific details regarding how this policy will relate to loss arising out of terrorism, please review the above forms.

Please read your policy carefully

Your Brotherhood Mutual agent will be pleased to answer any questions you may have concerning your policy.

Notice- Payment for Certified Acts of Terrorism under the federal Terrorism Risk Insurance Act:
Coverage provided by your policy for loss caused by Certified Acts of terrorism will be partially reimbursed by the United States under a formula established by federal law. Under this formula, the United States pays a statutorily-specified percentage of covered terrorism losses exceeding the statutorily established deductible paid by the insurance company providing the coverage. The premium charged for terrorism-related coverage under this policy does not include any charges for the portion of loss covered by the federal government under the act.

NOTE: No coverage of any kind is provided by this notice form.

Policyholder Coverage Notice

Terrorism-Related Loss

General Notice- The federal Terrorism Risk Insurance Act contains a \$100 billion cap that limits U.S. Government reimbursement as well as insurer liability for losses resulting from certified acts of terrorism when the amount of such loss in any calendar year exceeds \$100 billion.

IF THE AGGREGATE INSURED LOSS FOR ALL INSURERS EXCEEDS \$100 BILLION, THE TERRORISM COVERAGE PROVIDED TO AFFECTED POLICYHOLDERS MAY BE REDUCED.

Policy-Specific Notice- A series of exclusionary forms have been added to your *MinistryFirst* policy that will impact both property and the liability coverages for losses arising out of terrorism. These forms are as follows:

EX-0611 (TERRORISM EXCLUSION – PROPERTY)
EX-0261 (TERRORISM EXCLUSION – LIABILITY)
EX-0651 (NUCLEAR, CHEMICAL AND BIOLOGICAL TERRORISM EXCLUSION- PROPERTY)
EX-0281 (NUCLEAR, CHEMICAL AND BIOLOGICAL TERRORISM EXCLUSION- LIABILITY)

The effect of these forms is to exclude coverage for all terrorism-related loss. Such exclusion includes, but is not limited to, terrorism loss involving the use of conventional weapons, such as explosives, as well as acts of nuclear, chemical or biological terrorism.

For specific details regarding how this policy will relate to loss arising out of terrorism, please review the above forms.

Please read your policy carefully

Your Brotherhood Mutual agent will be pleased to answer any questions you may have concerning your policy.

Notice- Payment for Certified Acts of Terrorism under the federal Terrorism Risk Insurance Act:
Coverage provided by your policy for loss caused by Certified Acts of terrorism will be partially reimbursed by the United States under a formula established by federal law. Under this formula, the United States pays a statutorily-specified percentage of covered terrorism losses exceeding the statutorily established deductible paid by the insurance company providing the coverage. The premium charged for terrorism-related coverage under this policy does not include any charges for the portion of loss covered by the federal government under the act.

NOTE: No coverage of any kind is provided by this notice form.

Policyholder Coverage Notice

Terrorism-Related Loss

General Notice- The federal Terrorism Risk Insurance Act contains a \$100 billion cap that limits U.S. Government reimbursement as well as insurer liability for losses resulting from certified acts of terrorism when the amount of such loss in any calendar year exceeds \$100 billion.

IF THE AGGREGATE INSURED LOSS FOR ALL INSURERS EXCEEDS \$100 BILLION, THE TERRORISM COVERAGE PROVIDED TO AFFECTED POLICYHOLDERS MAY BE REDUCED.

Policy-Specific Notice- Two forms has been added to your *MinistryFirst* policy that will impact property coverage relating to losses arising out of terrorism. These forms are as follows:

BCL-0600 (CERTIFIED AND NON-CERTIFIED TERRORISM LOSS- PROPERTY)
EX-0651 (NUCLEAR, CHEMICAL AND BIOLOGICAL TERRORISM EXCLUSION- PROPERTY)

The effect of these forms in general is to extend coverage for certain terrorism-related losses to the extent that coverage would have applied in the absence of terrorism. An exception applies for losses arising out of excluded acts of nuclear, chemical or biological terrorism, for which no coverage will apply.

For specific details regarding how this policy will relate to loss arising out of terrorism, please review the above forms.

Please read your policy carefully

Your Brotherhood Mutual agent will be pleased to answer any questions you may have concerning your policy.

Notice- Payment for Certified Acts of Terrorism under the federal Terrorism Risk Insurance Act:
Coverage provided by your policy for loss caused by Certified Acts of terrorism will be partially reimbursed by the United States under a formula established by federal law. Under this formula, the United States pays a statutorily-specified percentage of covered terrorism losses exceeding the statutorily established deductible paid by the insurance company providing the coverage. The premium charged for terrorism-related coverage under this policy does not include any charges for the portion of loss covered by the federal government under the act.

NOTE: No coverage of any kind is provided by this notice form.

Policyholder Coverage Notice

Terrorism-Related Loss

General Notice- The federal Terrorism Risk Insurance Act contains a \$100 billion cap that limits U.S. Government reimbursement as well as insurer liability for losses resulting from certified acts of terrorism when the amount of such loss in any calendar year exceeds \$100 billion.

IF THE AGGREGATE INSURED LOSS FOR ALL INSURERS EXCEEDS \$100 BILLION, THE TERRORISM COVERAGE PROVIDED TO AFFECTED POLICYHOLDERS MAY BE REDUCED.

Policy-Specific Notice-Two exclusionary forms have been added to your *MinistryFirst* policy that will impact property coverage relating to losses arising out of terrorism. This form is as follows:

EX-0611(TERRORISM EXCLUSION – PROPERTY)

EX-0651 (NUCLEAR, CHEMICAL AND BIOLOGICAL TERRORISM EXCLUSION- PROPERTY)

The effect of these forms is to exclude coverage for all terrorism-related loss. Such exclusion includes, but is not limited to, terrorism loss involving the use of conventional weapons, such as explosives, as well as acts of nuclear, chemical or biological terrorism.

For specific details regarding how this policy will relate to loss arising out of terrorism, please review the above form.

Please read your policy carefully

Your Brotherhood Mutual agent will be pleased to answer any questions you may have concerning your policy.

Notice- Payment for Certified Acts of Terrorism under the federal Terrorism Risk Insurance Act:

Coverage provided by your policy for loss caused by Certified Acts of terrorism will be partially reimbursed by the United States under a formula established by federal law. Under this formula, the United States pays a statutorily-specified percentage of covered terrorism losses exceeding the statutorily established deductible paid by the insurance company providing the coverage. The premium charged for terrorism-related coverage under this policy does not include any charges for the portion of loss covered by the federal government under the act.

NOTE: No coverage of any kind is provided by this notice form.

IMPORTANT- Your response to this disclosure form will affect coverage under the policy being requested. An authorized representative must complete the form. Please read this notice carefully.

POLICYHOLDER DISCLOSURE OF TERRORISM INSURANCE COVERAGE

Prospective Named Insured: _____ Zip Code (Primary Location): _____

Type of Policy Applied For: Commercial Property/Liability (CMP or Mono-Line)

This Disclosure Notice relates to coverage for certain losses caused by terrorism. We are required to notify you of the amount of policy premium that will be charged to provide coverage for terrorist acts under applicable federal Terrorism Risk Insurance laws. Federal law also requires us to provide the disclosure of federal participation in the payment of terrorism losses. For a description of an "act of terrorism" as provided under this law, see the italicized note below.

Under applicable Terrorism Risk Insurance law, you have the option to either: (1) Pay the premium listed below, in which case the Commercial Property/Liability policy issued will respond to covered acts of terrorism; or (2) Reject terrorism coverage, in which case no terrorism coverage premium will be charged, and no coverage will apply under the commercial policy applied for in relation to any terrorism-related loss. Neither option will pay for loss associated with nuclear, biological or chemical terrorist attacks.

Should you elect to accept the terrorism coverage offered, then coverage provided by your policy for loss caused by certified acts of terrorism will be partially reimbursed by the United States under a formula established by federal law. Under this formula, the United States pays a specified percentage of covered terrorism losses exceeding the statutorily established deductible paid by the insurance company providing the coverage. The premium charged for this coverage is shown below. This premium does not include any charges for the portion of loss covered by the federal government under the law.

PREMIUM CHARGE- The annual premium charge to obtain coverage for acts of terrorism under the terms of the commercial CMP or Mono-Line policy indicated above is:

\$ _____ [This premium is subject to adjustment if your exposure changes]

COVERAGE SELECTION- As an authorized representative of the Named Insured, I agree that I have read this Disclosure Notice document and make the following selection on behalf of the Named Insured (Select one):

☐ We ACCEPT the terrorism coverage being offered, and will pay the annual premium indicated above to provide coverage under the terms of the policy being applied for.

☐ We REJECT the terrorism coverage being offered, and acknowledge that the policy being applied for will provide no terrorism coverage. (And no terrorism premium charge will apply).

Signature

Printed Name

Date

Please complete this form and return it with your application. Your selection above will remain in effect in relation to future policies unless you request a change. You must notify your agent if you later wish to change your selection.

Note: (1) No coverage of any kind is provided by this Disclosure Notice form; and (2) The following is defined as an "act of terrorism" under applicable federal law, though neither the Act nor your policy will cover all potential terrorism loss:

The term "act of terrorism" means any act that is certified by the Secretary of the Treasury, in concurrence with the Secretary of State, and the Attorney General of the United States—to be an act of terrorism; to be a violent act or an act that is dangerous to human life, property; or infrastructure; to have resulted in damage within the United States, or outside the United States in the case of an air carrier or vessel or the premises of a United States mission; and to have been committed by an individual or individuals as part of an effort to coerce the civilian population of the United States or to influence the policy or affect the conduct of the United States Government by coercion.

IMPORTANT- The federal Terrorism Risk Insurance Act contains a \$100 billion cap that limits U.S. Government reimbursement as well as insurer liability for losses resulting from certified acts of terrorism when the amount of such loss in any calendar year exceeds \$100 billion. If the aggregate insured loss for all insurers exceeds \$100 billion, YOUR COVERAGE MAY BE REDUCED.

<i>SERFF Tracking Number:</i>	<i>BRTH-125484476</i>	<i>State:</i>	<i>Arkansas</i>
<i>Filing Company:</i>	<i>Brotherhood Mutual Insurance Company</i>	<i>State Tracking Number:</i>	<i>EFT \$50</i>
<i>Company Tracking Number:</i>	<i>AR P FC 2008 01</i>		
<i>TOI:</i>	<i>01.0 Property</i>	<i>Sub-TOI:</i>	<i>01.0001 Commercial Property (Fire and Allied Lines)</i>
<i>Product Name:</i>	<i>TERRORISM - EXPEDITED FILING TRIPRA</i>		
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Rate Information

Rate data does NOT apply to filing.

SERFF Tracking Number: BRTH-125484476 State: Arkansas
Filing Company: Brotherhood Mutual Insurance Company State Tracking Number: EFT \$50
Company Tracking Number: AR P FC 2008 01
TOI: 01.0 Property Sub-TOI: 01.0001 Commercial Property (Fire and Allied Lines)
Product Name: TERRORISM - EXPEDITED FILING TRIPRA
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Supporting Document Schedules

Bypassed -Name: Uniform Transmittal Document-Property & Casualty
Bypass Reason: N/A - Using Expedited Terrorism Transmittal
Comments:

Review Status:
Approved 02/22/2008

Satisfied -Name: EXPEDITED TERRORISM TRANSMITTAL
Comments:
Attachment:
AR TRIA_expedited_filing_form.pdf

Review Status:
Approved 02/22/2008

**EXPEDITED FILING TRANSMITTAL DOCUMENT
FOR TERRORISM RISK INSURANCE FORMS AND PRICING**

This page applies to the following state(s)

Indicate Type of Filing
<input type="checkbox"/> Filing Related to <i>Certified Losses</i>
<input type="checkbox"/> Filing Related to <i>Non-Certified Losses</i>
<input type="checkbox"/> Filing Applicable to Both Certified and Non-Certified Losses

Department Use only

Company Name(s)	Domicile	NAIC #	FEIN #

Contact Info for Filer

Name and address of Filer(s)	Telephone #	FAX #	e-mail

Filing information

Line of Insurance (see attachment)	
Company Program Title (Marketing title) (if applicable)	
Filing Type ** see note below	
This application is used with:	
Effective Date Requested	
Filing date	
Company Tracking Number	
Date filing approved in domiciliary state, if applicable	

	<u>Component/Form Name</u> <u>/Description/Synopsis</u>	Form # or Rate Page Include edition date	Replacement Or withdrawn?	If replacement, give form # or rate page(s) it replaces	Previous State Filing Number, if required by state
01			<input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn <input type="checkbox"/> Neither		
02			<input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn <input type="checkbox"/> Neither		
03			<input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn <input type="checkbox"/> Neither		
04			<input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn <input type="checkbox"/> Neither		
05			<input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn <input type="checkbox"/> Neither		

06			<input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn <input type="checkbox"/> Neither		
07			<input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn <input type="checkbox"/> Neither		
08			<input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn <input type="checkbox"/> Neither		
09			<input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn <input type="checkbox"/> Neither		
10			<input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn <input type="checkbox"/> Neither		

To be complete, a filing must include the following:

- A completed Expedited Filing Transmittal Document for each insurer or advisory organization.
- One copy of each endorsement, disclosure form or other policy language, unless the insurer has given an advisory organization authorization to file them on its behalf.
- A copy of the rates, rating systems and supporting documentation.
- The appropriate filing fees, if required
- A postage-paid, self-addressed envelope **large enough to accommodate the return.**

The insurer(s) submitting this filing certifies that it:

- ☐ Is in compliance with the terms of the Terrorism Risk Insurance Act, as amended, and the laws of this state; and
- ☐ Is in compliance with the requirements of the bulletin containing the voluntary expedited filing procedures.

Signature

Print Name:

Title: